



MEDI-CAL UPDATE

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www.medi-cal.ca.gov

Pharmacy Bulletin 658

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Medi-Cal List of Contract Drugs

The following provider manual sections have been updated: *Drugs: Contract Drugs List Part 1 – Prescription Drugs* and *Drugs: Contract Drugs List Part 4 – Therapeutic Classifications Drugs*.

Addition, effective July 1, 2007

<u>Drug</u>	<u>Size and/or Strength</u>	<u>Billing Unit</u>
EXENATIDE		
Pre-filled Injectable Pen	250 mcg/cc * 1.2 cc	cc
* Restricted to use as combination therapy in the treatment of Type 2 Diabetes in individuals with an HgbA1c > 7. Must currently be on or have failed a sulfonylurea, metformin and a thiazolidinedione with a maximum quantity restriction for the 5 mcg strength of 1.2 cc per dispensing and two dispensings in a 60-day period with a duration of therapy not lasting more than 60 days.		
	250 mcg/cc * 2.4 cc	cc
* Restricted to use as combination therapy in the treatment of Type 2 Diabetes in individuals with an HgbA1c > 7. Must currently be on or have failed a sulfonylurea, metformin and a thiazolidinedione with a maximum quantity restriction for the 10 mcg strength of 2.4 cc per dispensing with a maximum of four dispensings in a 100-day period.		

Please see **Contract Drugs**, page 3

EDS/MEDI-CAL HOTLINES

Border Providers (916) 636-1200
CDHS Medi-Cal Fraud Hotline 1-800-822-6222
Telephone Service Center (TSC) 1-800-541-5555
Provider Telecommunications Network (PTN) 1-800-786-4346

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For a complete listing of specialty programs and hours of operation, please refer to the Medi-Cal Directory in the provider manual.



OPT OUT is a service designed to save time and increase Medi-Cal accessibility. A monthly e-mail containing direct Web links to current bulletins, manual page updates, training information, and more is now available. Simply “opt-out” of receiving this same information on paper, through standard mail. To download the OPT-OUT enrollment form or for more information, go to the Medi-Cal Web site at www.medi-cal.ca.gov, and click the “Learn how...” OPT OUT link on the right side of the home page.

Stop Illegal Tobacco Sales

The simplest way to stop illegal tobacco sales to minors is for merchants to check ID and verify the age of the tobacco purchasers. Report illegal tobacco sales to 1-800-5-ASK-4-ID.

For more information, see the California Department of Health Services Web site at <http://www.dhs.ca.gov>.

MEDI-CAL FRAUD

IS AGAINST THE

LAW

MEDI-CAL FRAUD COSTS TAXPAYERS MILLIONS
EACH YEAR AND CAN ENDANGER
THE HEALTH OF CALIFORNIANS.

HELP PROTECT MEDI-CAL AND YOURSELF
BY REPORTING YOUR OBSERVATIONS TODAY.

CDHS MEDI-CAL FRAUD HOTLINE
1-800-822-6222

THE CALL IS FREE AND YOU CAN REMAIN ANONYMOUS.

Knowingly participating in fraudulent activities can result in prosecution and jail time. Help prevent Medi-Cal fraud.

Contract Drugs (continued)

Changes, effective July 1, 2007

<u>Drug</u>	<u>Size and/or Strength</u>	<u>Billing Unit</u>
* AMLODIPINE BESYLATE/BENAZEPRIL HYDROCHLORIDE		
* <u>Restricted to NDC labeler code 00078 (Novartis Pharmaceuticals Corporation) only.</u>		
+ Capsules	2.5 mg – 10 mg	ea
	5 mg – 10 mg	ea
	5 mg – 20 mg	ea
	10 mg – 20 mg	ea
	5 mg – 40 mg	ea
	10 mg – 40 mg	ea
APREPITANT		
* + Capsules	80 mg	ea
	125 mg	ea
	1 x 125 mg	ea
	2 x 80 mg	ea
* Restricted to use in cancer patients and to a maximum of either 1) one tri-fold pack per dispensing, or 2) one 125 mg capsule and/or two 80 mg capsules per dispensing.		
* <u>+ Capsules</u>	<u>40 mg</u>	<u>ea</u>
* <u>Restricted to use for the prevention of postoperative nausea and vomiting and limited to a maximum of one capsule per dispensing, not to exceed one dispensing in any 30-day period.</u>		
LEVETIRACETAM		
Solution, oral	100 mg/cc	cc
Tablets	250 mg	ea
	500 mg	ea
	750 mg	ea
	<u>1000 mg</u>	<u>ea</u>
OLOPATADINE HCL		
Ophthalmic solution	0.1 %	cc
	<u>0.2 %</u>	<u>cc</u>

+ Frequency of billing requirement

These updates are reflected on manual replacement pages drugs cdl p1a 6 and 10 (Part 2), drugs cdl p1b 9 and 38 (Part 2), drugs cdl p1c 11 (Part 2) and drugs cdl p4 14 (Part 2).

Medical Supply Changes: Two-Piece Ostomy Products

Medi-Cal Update 653 announced the implementation of recently negotiated contracts by the California Department of Health Services (CDHS) with manufacturers to obtain a maximum acquisition cost (MAC) for two-piece ostomy products and their associated skin barriers. Medi-Cal Update 655 announced a revised implementation date of July 1, 2007.

The implementation date has been changed to August 1, 2007 to add additional billing code categories and assist providers in identifying specific products. Reimbursement rates for two-piece ostomy products and associated skin barriers will not be implemented until further notice. Reimbursement rates will be published at a future date and providers will receive notification at that time.

Please see **Two-Piece Ostomy**, page 4

Two-Piece Ostomy *(continued)***Medical Supply Updates**

Medical supply product codes listed in *Medi-Cal Update 653* have been revised to assist providers in identifying specific products. The following medical supply product codes have been added for two-piece ostomy products and their associated skin barriers, effective August 1, 2007:

9906Q, 9907L, 9907R, 9914T, 9914U, 9914V, 9914W, 9914X, 9914Y, 9914Z, 9915Q and 9915Z

The products and product codes are listed in the forthcoming *Medical Supply Products: Ostomy* sections of the Part 2 manual.

Billing Transition

Effective for dates of service on or after August 1, 2007, the new two-piece ostomy products and their associated skin barriers will be implemented and providers may bill using the new product codes. Only listed two-piece ostomy products and their associated skin barriers are reimbursable. Providers who obtained *Treatment Authorization Requests* (TARs) for non-contracted items prior to October 1, 2007 can continue billing these items until their TAR authorization is exhausted.

Manufacturer Billing Code Update

Effective for dates of service on or after July 1, 2007, the Manufacturer Billing Code for Squibb, E.R. and Sons, Inc. will be reassigned to Convatec.

<u>Manufacturer Billing Code</u>	<u>Former Manufacturer Name</u>	<u>New Manufacturer Name</u>
SQ	Squibb, E.R. and Sons, Inc.	Convatec

Manual replacement pages will be released in the July *Medi-Cal Update*.

Medical Supply Updates: Tracheostomy Supplies

Effective July 1, 2007, the California Department of Health Services (CDHS) is initiating new medical supply codes to allow the billing of tracheostomy supplies.

The following medical supply product codes have been added for tracheostomy:

9916L, 9916M, 9916N, 9916P, 9916Q, 9916R, 9916S, 9916T, 9916U, 9916V, 9916W, 9916X, 9916Y, 9916Z, 9917P, 9917Q, 9917S, 9917T, 9917U and 9917V

This information is reflected on manual replacement pages mc sup lst3 13 thru 15 (Part 2).

Enteral Feeding Supplies Addition

Effective July 1, 2007, the following product has been added to the *Medical Supplies List* section:

Description	<u>Billing Code</u>	Bill Quantity In Total <u>Number of</u>
Low Profile Gastrostomy Feeding Button	9917W	button

This product is limited to one every 90 days (three months), four in one year.

This information is reflected on manual replacement page mc sup lst1 24 (Part 2).

New DUR Educational Articles Area on Medi-Cal Web Site

Drug Use Review (DUR) educational articles are now available in a new location on the Medi-Cal Web site (www.medi-cal.ca.gov). The new “DUR Educational Articles” area provides easier access to current and previously published educational articles, with titles and publication dates for each article listed and a brief description of the article. Providers can view the new DUR articles area by clicking the “DUR” link under “Provider Resources,” then “DUR Educational Articles.”

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Remove and replace: drugs cdl p1a 5/6, 9/10
 drugs cdl p1b 7 thru 10, 37/38
 drugs cdl p1c 11/12
 drugs cdl p4 13/14
 mc sup lst1 15/16 *, 23/24

Remove: mc sup lst3 13 thru 18

Insert: mc sup lst3 13 thru 20

* Pages updated due to ongoing provider manual revisions.